SERFF Tracking Number: TPCI-125694528 State: Arkansas Filing Company: State Tracking Number: 39323 PHL Variable Insurance Company

Company Tracking Number: 08JNROP

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number:

## Filing at a Glance

Company: PHL Variable Insurance Company

Implementation Date Requested: On Approval

Product Name: Guaranteed Minimum Death SERFF Tr Num: TPCI-125694528 State: ArkansasLH

Benefit Rider

TOI: A03I Individual Annuities - Deferred SERFF Status: Closed State Tr Num: 39323

Variable

Sub-TOI: A03I.002 Flexible Premium Co Tr Num: 08JNROP State Status: Approved-Closed

Filing Type: Form Co Status: Reviewer(s): Linda Bird

> Disposition Date: 06/19/2008 Authors: Peter Scavongelli, Scott

Zweig, Joseph Bonfitto, Marilyn Dolan, Elizabeth Wheeler, Barbara Slater, Industry Support, James Bronsdon, Kathleen Underwood

Date Submitted: 06/16/2008 Disposition Status: Approved

Deemer Date:

Implementation Date:

State Filing Description:

#### General Information

**Project Name:** Status of Filing in Domicile: Pending

Project Number: Date Approved in Domicile: Requested Filing Mode: Review & Approval **Domicile Status Comments:** Explanation for Combination/Other: Market Type: Individual Submission Type: New Submission Group Market Size:

Overall Rate Impact: Group Market Type: Filing Status Changed: 06/19/2008

Corresponding Filing Tracking Number:

State Status Changed: 06/19/2008

Filing Description:

Please see cover letter.

SERFF Tracking Number: TPCI-125694528 State: Arkansas
Filing Company: PHL Variable Insurance Company State Tracking Number: 39323

Company Tracking Number: 08JNROP

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number:

## **Company and Contact**

#### Filing Contact Information

Katie Underwood, Compliance Coordinator kathleen.underwood@phoenixwm.com

One American Row (860) 403-5063 [Phone] Hartford, CT 06102 (860) 403-7252[FAX]

**Filing Company Information** 

PHL Variable Insurance Company CoCode: 93548 State of Domicile: Connecticut

One American Row Group Code: 403 Company Type: Life Insurance and

Annuities

Hartford, CT 06102 Group Name: State ID Number:

(860) 403-5000 ext. [Phone] FEIN Number: 06-1045829

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## **Filing Fees**

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No

Fee Explanation: 1 Rider @ \$20.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

PHL Variable Insurance Company \$20.00 06/16/2008 20931890

SERFF Tracking Number: TPCI-125694528 State: Arkansas

Filing Company: PHL Variable Insurance Company

State Tracking Number: 39323

A03I.002 Flexible Premium

Company Tracking Number: 08JNROP

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI:

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number:

# **Correspondence Summary**

## **Dispositions**

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	06/19/2008	06/19/2008

Company Tracking Number: 08JNROP

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number: /

## **Disposition**

Disposition Date: 06/19/2008

Implementation Date: Status: Approved

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: 08JNROP

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Cover Letter		Yes
Supporting Document	Statement of Variability		Yes
Form	Guaranteed Minimum Death Benefit Ride	er	Yes

Company Tracking Number: 08JNROP

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number: /

## Form Schedule

Lead Form Number: 08JNROP

Review	Form	Form Typ	e Form Name	Action	Action Specific	Readability	Attachment
Status	Number				Data		
	JNROP	Policy/Cont Guaranteed ract/Fratern Minimum Death		Initial		0	08JNROP -
							Generic.pdf
		al	Benefit Rider				
		Certificate	:				
		Amendme	en				
		t, Insert					
		Page,					
		Endorsem	ne				
		nt or Ride	r				



## PHL VARIABLE INSURANCE COMPANY

A Stock Company

#### **GUARANTEED MINIMUM DEATH BENEFIT RIDER**

This rider is a part of the contract to which it is attached in consideration of the application, if any, and the charges as shown in the rider specifications below. Except as specified in this rider, it is subject to all of the provisions contained in the contract. This rider takes effect on the Rider Date. This rider must be elected at the time of initial purchase of the Contract. This rider may only be elected by an Owner(s) who has not attained age 81.

#### RIDER SPECIFICATIONS

Contract Number: [123456789]
Rider Date: [July 1, 2008]
Rider Fee Percentage: [0.15%]

#### **DEFINITIONS**

#### "Adjusted Partial Withdrawal" is equal to:

- a) the partial withdrawal and any applicable premium taxes withheld; multiplied by
- b) the death benefit immediately prior to the partial withdrawal; divided by
- c) the Contract Value immediately prior to the withdrawal.

"Due proof of death" includes both a death certificate, or some other form of notice satisfactory to us, and your election in a form satisfactory to us for the payment method.

"GMDB Base" means the total of all Purchase Payments, less any Adjusted Partial Withdrawal and any premium taxes, as applicable. An Adjusted Partial Withdrawal is calculated each time a withdrawal is taken.

"Net Contract Value" is equal to the Contract Value reduced by any applicable Transaction Fee, premium taxes, and the applicable portion of the Subscription Fee.

The following hereby amends and replaces the section of the contract captioned "Proceeds Payable on Death, Death Benefit Amount During the Accumulation Period."

#### PROCEEDS PAYABLE AT DEATH

**DEATH BENEFIT AMOUNT DURING THE ACCUMULATION PERIOD:** During the Accumulation Period, if the death of the Owner(s) occurs prior to the Contract Anniversary immediately following the Owner(s) attaining age 90, the death benefit will be equal to the greater of:

- 1) the GMDB Base; and
- 2) the Net Contract Value determined as of the end of the Valuation Period upon which we receive Due proof of death of the Owner.

If the death of the Owner(s) occurs on or after the Contract Anniversary immediately following the Owner(s) attaining age 90, the death benefit will be equal to the Net Contract Value determined as of the end of the Valuation Period upon which we receive Due proof of death of the Owner.

After the death benefit is determined, it remains in the Separate Account until distribution begins. From the time the death benefit is determined until distribution is made, any amount in the Sub-account will be subject to investment risks, which are borne by the Beneficiary.

If Joint Owners are named:

- 1) the death benefit is determined based on the Age of the oldest Owner; and
- 2) the death benefit is payable upon the first death.

08JNROP 1

If the Owner is a non-natural person, the death of an Annuitant will be treated as the death of the Owner.

If more than one Annuitant is named:

- 1) the death benefit is determined based on the Age of the oldest Annuitant; and
- 2) the death benefit is payable upon the first death.

#### RIDER CHARGE

After the Rider Date, the rider charge will be deducted from the Contract Value on each Contract Anniversary. The rider charge is equal to the Rider Fee Percentage, shown in the rider specifications, multiplied by the greater of the GMDB Base and the Contract Value. Unless we agree otherwise, the rider charge will be deducted proportionally from each investment option.

On the Contract Anniversary immediately following the Owner(s) attaining age 90, the GMDB Base will equal the Contract Value and no further rider charges will be deducted.

If you surrender the Contract on a date other than on a Contract Anniversary, we will deduct a proportional rider charge from the amount paid upon surrender. If this rider terminates, we will assess the current year rider charge at the time the rider terminates prorated by the time elapsed for the Contract Year. Past rider charges will not be refunded.

The rider charge will not be deducted after the Contract Value decreases to zero.

#### Cancellation

After the Rider Date, you cannot affirmatively request to cancel this rider. However, the rider may terminate in accordance with the Termination of Rider provision below.

#### **Spousal Continuation**

Unless the Owner has previously elected a death benefit payment option, a Beneficiary who is a spouse of the deceased Owner may elect to continue the Contract in his or her own name at the then current death benefit amount, which amount shall be deemed to be the initial Purchase Payment for purposes of this rider.

#### **Termination of Rider**

This rider will terminate without value on the occurrence of any of the following dates:

- 1. the date there is a change of owner or joint owner (or annuitant if any owner is a non-natural person);
- 2. the Annuity Date;
- 3. the date the contract to which this rider is attached terminates;
- 4. the date the Contract Value decreases to zero.

Signed for PHL Variable Insurance Company.

PHL Variable Insurance Company

John H. Been

[Secretary]

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Company Tracking Number: 08JNROP

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number: /

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: TPCI-125694528 State: Arkansas
Filing Company: PHL Variable Insurance Company State Tracking Number: 39323

Company Tracking Number: 08JNROP

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Guaranteed Minimum Death Benefit Rider

Project Name/Number:

# **Supporting Document Schedules**

**Review Status:** 

Satisfied -Name: Certification/Notice 06/12/2008

Comments:

**Attachment:** AR certifications - 08JNROP.pdf

Review Status:

Satisfied -Name: Cover Letter 06/16/2008

Comments: Attachment:

AR Cover Letter.pdf

**Review Status:** 

Satisfied -Name: Statement of Variability 06/16/2008

Comments: Attachment:

Statement of Variability JNROP.pdf

# **ARKANSAS**CERTIFICATION

FORM NO. **08JNROP** 

FORM TITLE Guaranteed Minimum Death Benefit Rider

FLESCH SCORE Not Applicable

## I hereby certify the following:

- To the best of my knowledge and belief, the above form(s) and submission comply with Reg. 19 and Reg. 49, as well as the other laws and regulations of the State of Arkansas.

- The attached forms comply with ACA 23-79-138 and Bulletin 11-88.

## **PHL Variable Insurance Company**

Signature: Katie Underwood

Katie Underwood

Title: Compliance Coordinator

Date: 6/16/2008



### Kathleen Underwood - State Compliance Coordinator

Life & Annuity State Compliance Office One American Row Hartford, CT 06102-5056 (860) 403-5063 Fax: (860) 403-7252 Toll Free: 1-800-349-9267 (press 2, then 4) Email: Kathleen.Underwood@phoenixwm.com

June 16, 2008

Mr. Joe Musgrove Department of Insurance State of Arkansas 1200 West Third Street Little Rock, Arkansas 72201

RE: PHL Variable Insurance Company

NAIC #: 93548, FEIN #: 06-1045829

Subject line

Form 08JNROP - Guaranteed Minimum Death Benefit Rider

Dear Mr. Musgrove:

We are filing the above-referenced form for approval in your jurisdiction. The form is filed in accordance with the applicable statutes and regulations of your jurisdiction and are laser printed, subject only to minor variations in paper stock, color, fonts, duplexing, and positioning. This form is new and is not intended to replace an existing form. The forms will be effective on the date of approval. It was approved by our domiciliary state of Connecticut for use outside of Connecticut effective June 13, 2008.

Form **08JNROP**, the Guaranteed Minimum Death Benefit Rider provides the greater of the return of premiums paid or the net contract value upon death of the owner. This rider must be elected at the time of application. There are monthly charges for this rider.

The above referenced rider may be offered with new issues of our variable annuity contracts that have been previously and subsequently approved by your Department.

We intend to file these forms in all 50 States plus the District of Columbia and Puerto Rico.

Text ordinarily bracketed appears in the schedule pages of the rider forms. See the attached Statement of Variability for a more complete description.

We have not included any Flesh score or Readability Certificate for these forms as state readability requirements generally exempt annuity products filed as securities under Federal Securities Laws.

Your attention to the submission is appreciated. Should you have any questions regarding any of the materials in this filing, please do not hesitate to contact me at (860) 403-5063, by fax at (860) 403-5239 or by e-mail at kathleen.underwood@phoenixwm.com.

Sincerely,

Katie Underwood

Compliance Coordinator

atie Underwood

#### Statement of Variability

PHL Variable Insurance Company

#### Form 08JNROP

This Statement of Variability sets forth the variable information which will appear in brackets in form **08JNROP** (Guaranteed Minimum Death Benefit Rider). No change in variability will be made which in any way expands the scope of the wording being changed.

#### Page 1:

**Contract Number:** The unique number for each contract will appear in this field.

Rider Date: The date the rider is issued will appear in this field.

<u>Rider Fee Percentage:</u> The percentage in effect on the Rider Date, used to determine the rider fee, will appear in this field. Should we change this percentage, it would be for new issues only and could range from 0% to 1.00%.

#### Page 2:

We have placed brackets around the Company officer's signature and title to indicate that the name and/or title of the officer may change in the future.